

## Scope of Work section

NOTE: This section differs for Planning, Project and Management Costs subgrant applications.

- Inserted fields from the *Mitigation Activity* section which was removed
  - Title of your proposed activity
  - What type of mitigation activity(ies) are you proposing?

### **PROJECTS** only -

- Are you doing construction in this project?

### **PLANS** only -

- Please select one of the following options to describe the intent of this planning application:  
Develop a new plan  
Update an existing plan

- Moved field
  - “Enter Work Schedule” moved to new *Schedule* section

## **PLANNING:**

- Revised field
  - “Describe the plan development process” was revised as “Describe the process for implementing the planning activity, including the following plan development requirements: 1) participation of agencies, stakeholders and the public; 2) hazard identification and risk/vulnerability assessment; 3) mitigation strategy; 4) plan adoption; and 5) plan maintenance.”
- Inserted fields from the *Hazard Information* section which was removed
  - Describe the geographic area(s) to be covered by the plan. Attach geographical/topographical maps as necessary.
  - Identify Hazard(s) to be Mitigated
- New fields
  - What are the primary sources of information and data and how it will be incorporated into existing planning mechanisms?
  - What staff and resources will be used to implement this planning activity?

## Old format:

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Scope of Work

1. Application Status  
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3. Contact Information  
4. Community Information  
5. Mitigation Plan Information  
6. Mitigation Activity Information  
7. Hazard Information  
8. Scope of Work  
9. Cost Estimate  
10. Match Sources  
11. Cost Effectiveness Information  
12. Evaluation Information  
13. Environmental/Historic Preservation Information  
14. Comments and Attachments  
15. Review and Submit Application

Print Application  
Return to Home Page  
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### Scope of Work (Part 1 of 2)

Application 21% complete

Please provide the following information. When you are finished, click the **Save** and **Continue** button below.

Note: Fields marked with an \* are required.

Describe the plan development process. (If updating an existing plan, please indicate here.)  
(Maximum 4000 characters)

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)

To attach documents, click the **Attachments** button below.

Attachments

Go Back Save Save and Continue

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Scope of Work

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10. Match Sources  
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12. Evaluation Information  
13. Environmental/Historic Preservation Information  
14. Comments and Attachments  
15. Review and Submit Application

Print Application  
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### Scope of Work (Part 2 of 2)

Application 21% complete

Please provide the following information. When you are finished, click the **Save** and **Continue** button below.

Note: Fields marked with an \* are required. You need to add at least one task and each individual task can't be greater than the total duration of the proposed activity for the section to be complete.

Enter Work Schedule

Estimate the total duration of the proposed activity:  
(Must equal or exceed each task duration)

Add Task

Go Back Save Save and Continue

## NEW FORMAT:

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Planning Application

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**Scope of Work**

1. Application Status  
2. Subapplicant  
3. Contact  
4. Community  
5. Mitigation Plan  
6. Scope of Work  
7. Schedule  
8. Cost Estimate  
9. Cost Share  
10. Evaluation  
11. Comments and Attachments  
12. Review and Submit Application

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**Scope of Work (Page 1 of 2)**

Application 90% complete

Please provide the following information. When you are finished, click the Save and Continue button below.

Note: Fields marked with an \* are required.

\* Title of your proposed activity (should include the type of activity and location):  
Test Plan 36524

\* What type of mitigation activity(ies) are you proposing?  
Add Activity Delete Help

Select	Activity Code	Activity Name
<input type="checkbox"/>	700.1	Management Costs - Salaries
<input type="checkbox"/>	700.2	Management Costs - Equipment
<input type="checkbox"/>	700.4	Management Costs - Supplies

If you selected Other or Miscellaneous, above, please specify:

\* Describe the geographic area(s) to be covered by the planning activity. Attach geographical/topographical maps:  
xx

Identify the source(s) of hazards specific to the geographic area to be addressed by the planning activity:  
(checkboxes for multiple selections)  
Biological  
Chemical  
Civil Unrest  
Coastal Storm

Go Back Save Save and Continue

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Done

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Test Plan 36524

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**Scope of Work**

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8. Cost Estimate  
9. Cost Share  
10. Evaluation  
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**Scope of Work (Page 2 of 2)**

Application 90% complete

Please select one of the following options to describe the intent of this planning application:  
☐ Develop a new plan  
☒ Update an existing plan

\* If a plan update, please describe the evaluation process of the existing plan for its strengths, weaknesses and utility:  
xx

\* Describe the process for implementing this planning activity, including the following plan development requirements: 1) participation of agencies, stakeholders and the public; 2) hazard identification and risk/vulnerability assessment; 3) mitigation strategy; 4) plan adoption; and 5) plan maintenance.  
xx

\* What are the primary sources of information and data and how it will be incorporated into existing planning mechanisms?  
xx

\* What staff and resources will be used to implement this planning activity?  
xx

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)  
xx

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Describe the process for implementing this planning activity, including the following plan development requirements: 1) participation of agencies, stakeholders and the public; 2) hazard identification and risk/vulnerability assessment; 3) mitigation strategy; 4) plan adoption; and 5) plan maintenance.

xxx

What are the primary sources of information and data and how it will be incorporated into existing planning mechanisms?

xxx

What staff and resources will be used to implement this planning activity?

xxx

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)

xxx

To attach documents, click the **Attach File** button below.

Name	Date Attached	Action
<a href="#">Mail Description</a>	06-09-2011	<a href="#">Delete</a>

**Attach File**

Go Back Save Save and Continue

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Internet 100%

## PROJECT:

- Revised fields
  - “What are the goals and objectives of this activity?” was revised as “Provide a clear and detailed description of your proposed activity.”
  - Briefly describe the need for this activity.  
New text added: “Why should this mitigation activity be completed?”
  - “Describe the methodology for implementing this activity” was revised as “How will the mitigation activity be implemented?”
- Deleted field
  - Describe the problems this activity will address
- Inserted fields from the *Hazard Information* section which was removed
  - Enter the Latitude and Longitude coordinates for the project area
  - Identify Hazard(s) to be Mitigated
  - Provide a detailed description of the proposed project's location (e.g. municipality, street address, major intersecting streets and other important landmarks). Please attach supporting documentation such as maps that clearly identify the location and critical features to the project such as topography, waterways, adjacent community boundaries, etc., and mark your project site on the FIRM/DFIRM/FHBM (even if it is out of the floodplain)
- Inserted fields from the *Decision Making Information* section which was removed
  - Explain why this project is the best alternative. What alternatives were considered to address the Risk and why was the proposed activity considered the best alternative?

- Inserted fields from the *Maintenance Schedule and Costs* section which was removed
  - Please identify the entity that will perform any long-term maintenance and provide a maintenance schedule and cost information. The subapplicant or owner of the area to be mitigated is responsible for maintenance (including costs of long-term care) after the project is completed:
- New fields
  - Who will the mitigation activity benefit and/or impact?
  - Describe how the project is technically feasible and will be effective in reducing the risk by reducing or eliminating damage to property and/or loss of life in the project area. Please include engineering design parameters and references to the following: preliminary schematic or engineering drawings/design; applicable building codes; engineering practices and/or best practices; level of protection (e.g., life safety, 100-yr floor protection with freeboard, 100-yr wind design, etc.):
  - Who will manage and complete the mitigation activity?
  - Will the project address the hazards identified and what risks will remain from all hazards after project implementation (residual risk)?
  - When will the mitigation activity take place?

Old format:

The screenshot shows the FEMA.gov Project Application form in a Windows Internet Explorer browser. The page title is "Project Application" and the URL is "https://eservices.fema.gov/FEMAMitigation/processFemaRequest.do". The user is logged in as "Eric Jordan" and the session expires in 28 minutes. The page is titled "Scope of Work (Part 1 of 2)" and shows "Application 27% complete".

**Scope of Work (Part 1 of 2)**

Please provide the following information. When you are finished, click the Save and Continue button below.

**Note:** Fields marked with an \* are required.

\*What are the goals and objectives of this activity? (Maximum 4000 characters)

\*Briefly describe the need for this activity. (Maximum 4000 characters)

\*Describe the problems this activity will address. (Maximum 4000 characters)

\*Describe the methodology for implementing this activity. (Maximum 4000 characters)

If you would like to make any comments, please enter them below. (Maximum 4000 characters)

The form includes a sidebar with navigation links: 1. Application Status, 2. Applicant Information, 3. Contact Information, 4. Community Information, 5. Mitigation Plan Information, 6. Mitigation Activity Information, 7. Hazard Information, 8. Scope of Work, 9. Properties, 10. Decision Making Process, 11. Cost Estimate, 12. Match Sources, 13. Cost Effectiveness Information, 14. Environmental/Historic Preservation Information, 15. Maintenance Schedule, 16. Evaluation Information, 17. Comments and Attachments, 18. Assurances and Certifications, 19. Review and Submit Application. There are also links for Print Application, Return to Home Page, Logout, Privacy Statement, and Disclaimers.

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Project Application

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### Scope of Work

Application 27% complete

Please provide the following information. When you are finished, click the *Save and Continue* button below.

**Note:** Fields marked with an \* are required. You need to add at least one task and each individual task can't be greater than the total duration of the proposed activity for the section to be complete.

**Enter Work Schedule** [Help](#)

\* Estimate the total duration of the proposed activity:  
(Must equal or exceed each task duration)

Day(s)

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[old Mitigation Activity Information section removed from application]

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### Mitigation Activity

Application 27% complete

Please provide the following information. Click on the *Add* button to add activities. To replace an activity, click on the *Replace* button. To delete an activity, click on the *Delete* button. Please note that only one activity can be replaced at a time. When you are finished, click on the *Save and Continue* button below.

**Note:** Fields marked with an \* are required

\* What type of activity are you proposing?    [Help](#)

Select	Activity Code	Activity Name
<input type="checkbox"/>	200.1	Acquisition of Private Real Property (Structures and Land) - Riverine

If you selected Other or Miscellaneous, above, please specify:

\* Title of your proposed activity (should include the type of activity and location)

Smoke test 08-25-2011 (e.g. City of Fairfax Retrofit Project)

\* Are you doing construction in this project?

☒ Yes ☐ No

If you would like to make any comments, please enter them below.

(Maximum 4000 characters)

To attach documents, click the *Attachments* button below.

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[old Hazard Information section removed from application]

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### Hazard Information

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### Hazard Information (Part 1 of 3)

Application 27% complete

Please provide the following information. When you are finished, click the Save and Continue button below.

**Problem Description** [Help](#)

Please describe the problem to be mitigated. Include the geographic area in your description.  
(Maximum 4000 characters)

**Enter the Latitude and Longitude coordinates for the project area.**

**Latitude :**  (e.g. 80.4301, should be between -90 to +90) [Help](#)

**Longitude :**  (e.g. 89.4301, should be between -180 to +180) [Help](#)

To attach documents, click the **Attachments** button below.

**Attachments**

**Go Back** **Save** **Save and Continue**

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Project Application

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### Hazard Information

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### Hazard Information (Part 2 of 3)

Application 41% complete

Please provide the following information. When you are finished, click the Save and Continue button below.

**Hazards**

Select hazards to be mitigated: [\(control-click for multiple selections\)](#)

Biological  
Chemical  
Civil Unrest  
Coastal Storm

If other hazards, please specify:

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)

To attach documents, click the **Attachments** button below.

**Attachments**

**Go Back** **Save** **Save and Continue**

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### Hazard Information

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### Hazard Information (Part 3 of 3)

Application 33% complete

Please provide the following information. When you are finished, click the *Save and Continue* button below.

**Note:** Fields marked with an \* are required.

<b>FIRM Information</b>	
*Is the project located within a hazard area (check all that apply):	<input type="checkbox"/> Floodway <input type="checkbox"/> Floodplain <input type="checkbox"/> Other identified high hazard area <input type="checkbox"/> No
If other identified high hazard area, please specify:	<input type="text"/>
*Is there a <a href="#">Flood Insurance Rate Map (FIRM)</a> or <a href="#">Flood Hazard Boundary Map (FHBM)</a> available for your project area?	<input type="radio"/> Yes <input type="radio"/> No
If you have selected Yes, the following three fields are required:	

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Is there a <a href="#">Flood Insurance Rate Map (FIRM)</a> or <a href="#">Flood Hazard Boundary Map (FHBM)</a> available for your project area?	<input type="radio"/> Yes <input type="radio"/> No
If you have selected Yes, the following three fields are required:	
Enter <a href="#">FIRM Panel Number</a> :	<input type="text"/> <input type="checkbox"/> check if Not Applicable
Mark your project site on the FIRM/FHBM (even if it is out of the floodplain) <a href="#">Link to create FIRMette for inclusion with application</a>	<input type="radio"/> Electronic map attached <input type="radio"/> Hard copy provided <input type="radio"/> Not Applicable
Select <a href="#">Flood Zone Designation</a>	(control-click for multiple selections): <input type="list"/>

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## [old Maintenance Schedule and Costs section removed from application]

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**Maintenance Schedule and Costs**

Application 27% complete

The subgrant applicant or owner of the area to be mitigated is responsible for maintenance - including costs of long-term care - after the project is completed. Please provide the following information. When you are finished, click the *Save and Continue* button below.

Provide a maintenance schedule including cost information.  
(Maximum 4000 characters)

Identify the entity that will perform any long-term maintenance.

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)

Attach letter from entity accepting performance responsibility by clicking the *Attachments* button below.

Attachments

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**Scope of Work (Page 1 of 3)**

Application 33% complete

Please provide the following information. When you are finished, click the *Save and Continue* button below.

**Note:** Fields marked with an \* are required.

\* Title of your proposed activity (should include the type of activity and location):  
Smoke test 08-29-2011

\* Identify Hazard(s) to be Mitigated:  
(control-click for multiple selections)  
Biological  
Chemical  
Civil Unrest  
Coastal Storm

\* What type of mitigation activity(ies) are you proposing?  
Add Activity Replace Delete Help

Select	Activity Code	Activity Name
<input type="checkbox"/>	200.1	Acquisition of Private Real Property (Structures and Land) - Riverine

If you selected Other or Miscellaneous, above, please specify:

\* Provide a clear and detailed description of your proposed activity:

\* Are you doing construction in this project?  
☒ Yes ☐ No

\* Provide a detailed description of the proposed project's location (e.g. municipality, street address, major intersecting streets and other important landmarks). Please attach supporting documentation such as maps that clearly identify the location and critical features to the project such as topography, waterways, adjacent community boundaries, etc., and mark your project site on the FIRM/DFIRM/FHBM (even if it is out of the floodplain):

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Scope of Work (Page 2 of 3)

Application 28% complete

Enter the Latitude and Longitude coordinates for the project area:

Latitude: 10.0 (e.g. 00.4301, should be between -90 to +90)

Longitude: 20.0 (e.g. 90.4301, should be between -90 to +90)

Briefly describe the need for this activity. Why should this mitigation activity be completed?

xx

Who will the mitigation activity benefit and/or impact?

xx

How will the mitigation activity be implemented?

xx

Describe how the project is technically feasible and will be effective in reducing the risk by reducing or eliminating damage to property and/or loss of life in the project area. Please include engineering design parameters and references to the following: preliminary schematic or engineering drawings/design; applicable building codes; engineering practices and/or best practices; level of protection (e.g., life safety, 100-yr floor protection with freeboard, 100-yr wind design, etc.).

xx

Who will manage and complete the mitigation activity?

xx

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Briefly describe the need for this activity. Why should this mitigation activity be completed?

xx

Who will the mitigation activity benefit and/or impact?

xx

How will the mitigation activity be implemented?

xx

Describe how the project is technically feasible and will be effective in reducing the risk by reducing or eliminating damage to property and/or loss of life in the project area. Please include engineering design parameters and references to the following: preliminary schematic or engineering drawings/design; applicable building codes; engineering practices and/or best practices; level of protection (e.g., life safety, 100-yr floor protection with freeboard, 100-yr wind design, etc.).

xx

Who will manage and complete the mitigation activity?

xx

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Done

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https://fdi.eservices.fema.gov/FEMAMitigation/processFemaRequest.do

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Project Application

Logged in: Kentucky Stategrantee | Last login: 09-12-2011 | Session expires in 30 mins

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### Scope of Work

1. Application Status  
2. Subapplicant  
3. Contact  
4. Community  
5. Mitigation Plan  
6. Scope of Work  
7. Properties  
8. Schedule  
9. Cost Estimate  
10. Cost Share  
11. Cost Effectiveness  
12. Environmental/Historic Preservation  
13. Evaluation  
14. Comments and Attachments  
15. Review and Submit Application

Print Application  
Return to Home Page  
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Application 28% complete

**Scope of Work (Page 3 of 3)**

Will the project address the hazards identified and what risks will remain from all hazards after project implementation (residual risk)?

xx

When will the mitigation activity take place?

xx

Explain why this project is the best alternative. What alternatives were considered to address the Risk and why was the proposed activity considered the best alternative?

xx

Please identify the entity that will perform any long-term maintenance and provide a maintenance schedule and cost information. The subapplicant or owner of the area to be mitigated is responsible for maintenance (including costs of long-term care) after the project is completed.

xx

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)

xx

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When will the mitigation activity take place?

xx

Explain why this project is the best alternative. What alternatives were considered to address the Risk and why was the proposed activity considered the best alternative?

xx

Please identify the entity that will perform any long-term maintenance and provide a maintenance schedule and cost information. The subapplicant or owner of the area to be mitigated is responsible for maintenance (including costs of long-term care) after the project is completed.

xx

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)

xx

To attach documents, click the **Attach File** button below.

Attach File

Go Back Save Save and Continue

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## MANAGEMENT COSTS:

- New field
  - What staff and resources will be used to implement this activity and who will manage it?
- Deleted field
  - What are the goals and objectives of this activity?

Old format:

The screenshot displays the FEMA.gov Management Cost Application interface. The top navigation bar includes the FEMA.gov logo, user login information (Kentucky Stategrantee, last login 09-12-2011, session expires in 30 mins), and the application title 'Management Cost Application'. The left sidebar lists the application steps: 1. Application Status, 2. Applicant Information, 3. Contact Information, 4. Community Information, 5. Mitigation Activity Information, 6. Scope of Work, 7. Cost Estimate, 8. Match Sources, 9. Cost Effectiveness Information, 10. Environmental/Historic Preservation Information, 11. Comments and Attachments, and 12. Review and Submit Application. The main content area is divided into two sections: 'Scope of Work (Part 1 of 2)' and 'Scope of Work (Part 2 of 2)'. The 'Scope of Work (Part 1 of 2)' section includes a 'Please provide the following information. When you are finished, click the Save and Continue button below.' instruction, a 'Note: Fields marked with an \* are required.' warning, and three text input fields: 'What are the goals and objectives of this activity?' (Maximum 4000 characters), 'Briefly describe how and where you plan to implement this activity.' (Maximum 4000 characters), and 'If you would like to make any comments, please enter them below.' (Maximum 4000 characters). Below these fields is an 'Attachments' button and a 'Go Back | Save | Save and Continue' button. The 'Scope of Work (Part 2 of 2)' section includes a similar instruction and a 'Note: Fields marked with an \* are required. You need to add at least one task and each individual task can't be greater than the total duration of the proposed activity for the section to be complete.' warning. It features a table titled 'Enter Work Schedule' with columns: Description Of Task, Starting Point, Unit Of Time, Duration, Unit Of Time, Work Complete By, and Action. The table contains two rows of data: 'Description of task' with a starting point of 4, unit of time of DAYS, duration of 3, and 'Description 2' with a starting point of 5, unit of time of DAYS, duration of 4. Below the table is a text input field for 'Estimate the total duration of the proposed activity:' (Must equal or exceed each task duration) and an 'Add Task' button. The bottom navigation bar includes links to FEMA home, e-grants home, contact us, frequently asked questions, glossary, help, and Disclosures.

**Scope of Work (Part 1 of 2)**

Application 100% complete

Please provide the following information. When you are finished, click the Save and Continue button below.

Note: Fields marked with an \* are required.

What are the goals and objectives of this activity?  
(Maximum 4000 characters)

Enter goal

Briefly describe how and where you plan to implement this activity.  
(Maximum 4000 characters)

Description

If you would like to make any comments, please enter them below.  
(Maximum 4000 characters)

Comments

To attach documents, click the Attachments button below.

Attachments

Go Back | Save | Save and Continue

**Scope of Work (Part 2 of 2)**

Application 100% complete

Please provide the following information. When you are finished, click the Save and Continue button below.

Note: Fields marked with an \* are required. You need to add at least one task and each individual task can't be greater than the total duration of the proposed activity for the section to be complete.

Description Of Task	Starting Point	Unit Of Time	Duration	Unit Of Time	Work Complete By	Action
Description of task	4	DAYS	3	DAYS		<a href="#">Update</a> <a href="#">Delete</a>
Description 2	5	DAYS	4	DAYS		<a href="#">Update</a> <a href="#">Delete</a>

Estimate the total duration of the proposed activity:  
(Must equal or exceed each task duration)

7 Day(s)

Add Task

Go Back | Save | Save and Continue

## NEW FORMAT:

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MC Test

Management Cost Application

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Print Application

Return to Home Page

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Title of your proposed activity (should include the type of activity and location):

MC Test

What type of mitigation activity(ies) are you proposing?

Add Activity Delete Help

Select	Activity Code	Activity Name
<input type="checkbox"/>	700.1	Management Costs - Salaries
<input type="checkbox"/>	700.2	Management Costs - Equipment

If you selected Other or Miscellaneous, above, please specify:

Briefly describe how and where you plan to implement this activity:

xx

What staff and resources will be used to implement this activity and who will manage it?

xx

If you would like to make any comments, please enter them below.

(Maximum 4000 characters)

To attach documents, click the Attach File button below.

Attach File

Go Back Save Save and Continue

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Internet 100%

